FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically.

OCT 1 9 2010

	Reset For	m	-0. 2 9 2010
COMMITTEE NAME (Must be same as on Statement of Organ	ization)		DD8
Harrison County Republican Committee		4 1	SPANIE CONTRA TO THE MELANGEMENT OF BRIDE TO
IMPORTANT: Indicate by # type of committee you are reporting for: 4 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Bo 11) Local Ballot Issue)State PAC (3)State Party ate / 7 \School Board or Other Political	(Rev	PR-2 DISCLOSURE REPORT Office Use Offix 9087
CANDIDATE COMMITTEES ONLY: Candidate Name	Political Party (if applicable)	Scar	m,# 1007 ped in nucler
Office Sought	District (if Senate or House)	1 1	ted
Late reports are subject to possible civil and criminal penalties. Purs candidate's committee, and the chairperson, for any other type of co	ommittee, is the individual responsible	e for filling time	ely and accurate reports.
SIGNATURE OF PERSON FILING REPORT	712-1246-3788 TELEPHONE	1 <u>0</u>	DATE SIGNED
I AM FILING A October 19, 2010	REPORT FOR (1) ELECTION	/(2)NON-EL	ECTION YEAR.
(report date)	Indicate by		
CHECK IF AMENDMENT TO REPORT DATED		Local Commi	ttees, enter Date of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.	Dissolution Form DR-3.	County & Loc which Electio	al Committees, enter County in n is held
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the cof the last reporting period or must be zero if this is fin	ash on hand at the end	\$	742.56
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedu	ıle A) (*also see in-kind below)	,	75.00
Schedule F: Loans Received total (Attach Schedule			
Schedule H. Total Sales of Campaign Property (Atta			
(Schedule H applies to Candidates' Comm	nittess Only)		
	SUB-TOTAL	\$	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)		52.43
Schedule F: Loan Repayments total (Attach Schedul	le F)		266.15
CASH ON HAND at the end of this reporting period (if final rep	ort balance must be zero)	\$	765.13
"*UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Altach Sched	dule E)	\$	
**OUTSTANDING LOANS (From Schedule F - Attach Schedu	le F)	\$	
CONSULTANT BREAKDOWN (Schedule G Attached?)		•	YESNO
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Atta	ch Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled campaign accou	nt bank statement in January of ea	ch year.	

For Instructions, See Back of Form	Reset Form	SCHEDULE	MONETARY
CONTRIBUTIONS MONEY TAKEN IN		(Rev. 07/03)	RECEIPTS
(including candidate's personal funds)			CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	ļ.	AME	NDING FORM
Harrison County Republican Committee		<u>L</u>	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE JOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Contributions of \$25.00 or less		\$75.00	
8/14/2010	ск#	Controducins of \$25.00 or reas		3 73.00	
	ID#				
	CK#				
	ID#				
	CK#				L
	ID#				
	CK#				L
	ID#				
	СК#				
	1D#				
	CK#				L
	ID#				
	СК#				L
	1D#				
	CK#				<u> </u>
	ID#				
	CK#				
··	ID#				
	CK#				
			SUB-TOTAL	\$ 75.00	

TOTAL (if last page of this schedule,

Page 2 of 3 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset	Form	-

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

Harrison County Republican Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/9/2010	ID# CK#215	Don Blackford 2661 Monroe Avc. Logan, IA 51546	Reimbursement for supplies and parade candy	\$ ^{52.43}
	ID#			
	СК#			
	1D#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	i		SUR-TOTAL	15 50 113

TOTAL (if last page of this schedule)

* 52,43

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lower Code 68A.402(3)(i).)